

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on 6 January 2005.



Brad Sherbuck - Assistant to Gavin N. Manning

File No.: K201 0010
GNM/TAR/bds

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): KOESSLER, Juergen

Title: VENT APPARATUS WITH REPLACEABLE VENT COVER

Serial No.: 10/612,270

Filed: 3 July 2003

Examiner: BOLES, Derek

Art Unit: 3749

Date: 6 January 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Dear Sir:

Transmitted herewith is an Amendment for this application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	42	47	0	\$50.00	\$ 0.00
Indep. Claims	10	5	5	\$200.00	\$1,000.00
Multiple Dep. Claims	0	0	0	\$360.00	\$ 0.00
TOTAL FEES					\$ 0.00
Reduction by 50% for filing by small entity (Note 37 CFR 1.27)					\$ 500.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$ 300.00

- ☒ Please charge any fees in connection with this communication, including any filing fees under 37 CFR 1.16 for the presentation of extra claims and any patent application processing fees under 37 CFR 1.17, or credit any overpayment, to Deposit Account No. 02-1037.
- ☒ Please charge any deficiency in fees or credit any overpayment to Deposit Account No. 02-1037.

01/12/2005 TTUTT2 00000001 021037 10612270

01 FC:2201 500.00 DA

Respectfully submitted,
OYEN WIGGS GREEN & MUTALA

By:

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10612270

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

TOTAL CLAIMS	47	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	47 minus 20 = *	27
INDEPENDENT CLAIMS	5 minus 3 = *	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	375.00
X\$ 9=	243
X42=	84
+140=	
TOTAL	702

RATE	FEE
BASIC FEE	750.00
X\$18=	
X84=	
+280=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 42	Minus ** 47	=
	Independent	* 10	Minus *** 5	= 5
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	500
+140=	
TOTAL ADDIT. FEE	500

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus **	=
	Independent	*	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus **	=
	Independent	*	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.